Commandant United States Coast Guard 2100 Second st S.W. Washington, DC 20593-0001 (202)267-0805

COMDTINST 6010.22 MAR 8 1993

COMMANDANT INSTRUCTION 6010.22

Subj: Health Services Division Status Report (RCN-6000-8)

- 1. PURPOSE. This instruction requires annual Health Services Division reports.
- 2. <u>DIRECTIVES AFFECTED</u>. COMDTINST 6600.4, Annual Dental Clinic Status Report, is canceled.
- 3. <u>DISCUSSION</u>. Since its implementation in 1987, the dental clinic status report has been a great value in assessing needs and developing long-range planning for Coast Guard dental facilities. There is good reason to believe that clinic-wide reports will be even more valuable in providing unit commanding officers, Headquarters and MLC health services planning personnel with an up-to-date overview of clinic activities. This information is critical in planning for the most efficient allocation of resources, and may be valuable to Chiefs, Health Services Divisions in fulfilling the requirements of their units. Additionally, such reports are required by external accrediting organizations, such as the Joint Commission on Accreditation of Healthcare Organizations and the Accreditation Association for Ambulatory Health Care. Standards promulgated by these accrediting organizations are frequently used by the Coast Guard to validate quality of care.
- 4. <u>REQUIRED REPORTS</u>. Effective FY 93, all unit commanding officers having Health Services Divisions or Branches shall submit Health Services Division Status Reports covering the preceding fiscal year. Submit reports annually to Commandant (G-KOM) via district commanders (where applicable) and Commanders (k), Maintenance and Logistics Commands.

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(cont'd) The Health Services Division Status Report is due at the respective MLC no later than 1 November, and at Commandant (G-KOM) no later than 1 December. Enclosure (1) is a <u>sample</u> short-answer report outline which may be locally reproduced and used for this purpose. Electronic copies of this report format are available as an Email attachment from Commandant (G-KOM).

5. Action. Area and district commanders, commanders of maintenance and logistics commands, and unit commanding officers shall ensure compliance with this directive. All administrators/supervisors of health care facilities shall document facility training/awareness of this directive in the training record of the facility. Clinic personnel shall complete this training within 30 days of receipt. MLC site survey teams shall review these records during periodic visits.

/S/
MICHAEL HUDGINS
Chief, Office of Health and Safety

Encl: (1) Sample report format

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To:		Commandant (G-KOM-)			
Via	:	Commander (k), Maintenance and Logistics Command			
Sub	j:	HEALTH SERVICES DIVISION STATUS REPORT (RCN-6000-8)			
1.		ndition, adequacy, and clinical appropriateness of physical ant (to include number and size of treatment rooms)			
2.		ndition, adequacy, and clinical appropriateness of major dical equipment:			
3.		th reference to comments above, what major budget tiatives are required at the Headquarters and/or MLC levels?			
4.	Based on patient demographics (available in <i>U.S Coast Guard Clinic Descriptions</i>) for active duty Coast Guard, active duty DOD, and non-active duty personnel:				
	a.	Is there any projected increase or decrease in size of population?			
	С.	Any barriers to increasing the number of beneficiaries served?			
5.	Hours of operation:				
		nic:			
		aining:eld day:			

Enclosure (1) to COMDTINST 6010.22

6.	Spe	ecial Programs:
	a.	Extern programs: Y N Med DentPharmPTPA # pts/yr:
	b.	Contract providers: Y N In house: Y NSpec: FP_IntMedOB/GYNOther:
	c.	Preventive health/Wellness programs:
7.	Med	lical Branch Report:
	a.	Initiatives/accomplishments:
	b.	Issues/problems:
	c.	Clinicians' evaluation of:
		1. Contracted services:
		2. Referrals:
		3. CHAMPUS:
8.	Den	tal Branch Report:
	a.	Initiatives/accomplishments:
	b.	Issues/problems:
	c.	Clinicians' evaluation of:
		1. Contracted services:
		2. Referrals:
		3. Delta*DDP:

9.	Phai	rmacy Branch Report:
	a.	Initiatives/accomplishments:
	b.	Issues/problems:
10.	Qual	lity Assurance Program Report:
	a.	Name & rank of QA Coordinator:
	b.	Summary of M&E activities:
		1) Medical:
		2) Dental:
		5) Fliatiliacy.
		4) Administration:
	С.	Positive changes resulting from QA activities:
	d.	QA problems which have been difficult to resolve:
	e.	Suggested changes to QA focus or evaluation methods:
11.	New	issues to address during the coming year:
Subr	nitte	
		Chief, Health Services Division date
App	roved	d:
		Commanding Officer date